



COMMISSION MEETING MINUTES
March 23, 2006

I. Call to Order and Roll Call

Chair Steinberg called the meeting to order at 2:00 p.m.

Present were Commissioners Wesley Chesbro, Carmen Diaz, F. Jerome Doyle, Saul Feldman, Linford Gayle, Mary Hayashi, Patrick Henning, Karen Henry, Kelvin Lee, William Lockyer, Andrew Poat, Darlene Prettyman, Darrell Steinberg.

Absent at roll call were: Commissioners Gary Jaeger, William Kolender, and Mark Ridley-Thomas

Tricia Wynne represented Commissioner Lockyer

II. Welcome, Purpose of Meeting

Chair Steinberg welcomed the Commissioners and public members to the meeting. MHSOAC has been assisting the Department in providing oversight on the county service plans and it is aggressively defining its role around prevention and early intervention, and continues to work on a major housing proposal. With Jennifer Clancy's input, it has been suggested to refocus on the issue of the Commission's strategic direction. Today's meeting will cover how the Commission sees its role as distinct from the Department and other stakeholders involved in the implementation of the Act.

The second major item to be discussed will be the intensive focus on prevention. The Prevention Committee is hard at work in defining how the money should be spent for prevention and early intervention. The Prevention Committee will continue to focus on services and supports and provide the crucial oversight role. A special presentation will be presented from some of the top scientists regarding early intervention.

Chair Steinberg provided a brief update on the housing issue. He said he is very close to a positive public announcement regarding this item, and he will advise everyone as soon as he knows when the announcement will be made.

**III. Mental Health Services Oversight and Accountability Commission (MHSOAC):
Goals & FY 06-07 Strategy**

Executive Director Jennifer Clancy said that it is her intent to have time on the agendas for the California Mental Health Director's Association, for the California Mental Health Planning Council and for the Department of Mental Health to provide updates.

Ms. Clancy said it is critical to spend some time at today's meeting to focus on the Commission. She mentioned that the Commission normally attempts to have the public comments occur in the morning on Friday. However, for this time it has been changed to Friday afternoon in order to ensure that the public has the opportunity to take in all the information presented.

Ms. Clancy said as the Commission moves forward it is important that they understand their opportunities and threats in order to take the best steps moving forward. At today's meeting she hopes there will be full Commission understanding of its distinguishing role, and again, she is attempting to distinguish the Commission's role from the Department of Mental Health, the Mental Health Directors of the Counties and the Planning Council. She also will spend some time talking on, and proposing, some strategic directions to focus on during fiscal year '07.

After public comments tomorrow, she hopes to have some time to either take action on the recommendations or at least make a decision on when the Commission will take action. She clarified that some of the issues she is going to be putting forward are actually recommendations for the discussion to occur.

- Whenever you have a strength that at the same time you have challenge. The strength of the Commission is that we came about during a period of hope. Hope was not present until the passing of the Mental Health Services Act, and now there is support. The challenge that the Commission faces is that it has to be very clear about its strategies in order to be responsive to both the mental health stakeholder community and also the general public.
- The strength of the Commission is the public support it has, but the challenge is public access. The Commission is new and it has infrastructure challenges, which means that it doesn't yet have clear policies and procedures and ways for the public to understand how to access the Commission.
- Another strength of the Commission is that there is funding for prevention and innovation, but the challenge is that the Mental Health Services Act was not very clear about the actual relationship of the Oversight and Accountability Commission and the Department of Mental Health. This will be an area that will be very important in order for the Commission and Department to collaborate together.
- Individual Commission members bring strengths. The fact that each member represents a diverse group, both of organizations and constituents is rare in many commissions. However members will have the challenge of making sure that they are coming to a point of view that is the perspectives of the Commission.
- Visibility is both strength and a challenge because everything that the Commission does is done in the public eye, which means it holds the Commission to its standards around accountability. The challenge is that it is very hard to allow the opportunity for mistakes when everything is so visible.
- Opportunities and threats: The Commission has a wonderful opportunity to provide oversight for transformation. The Commission needs to be aware of the challenges and strengths that other recent propositions in California are currently facing, especially in the area of oversight and accountability.
- This Commission has an opportunity to identify and fund strategies to eliminate disparities, but at the same time there is much public expectation placed on the shoulders of the Commission. The Commission will have to work out how it is honest about what it can do and how it is that they are managing the public expectations.
- The Commission has an opportunity to provide leadership in the area of prevention and innovation, but its challenge is how it will be inclusive and intentional about public involvement strategies.
- The counties want to make certain that the Commission is remembering that there has been incredible local level leadership that was built during the community services and supports planning. This is something that has never before happened in this state; it has never happened before in this country, and it probably hasn't happened before in other

countries. There are local leaders that now have experience, in terms of moving forward, of an incredible community organizing process. The Commission is challenged on how it is going to either support the local level leaders and what is it doing that may potentially suppress them.

Recommendations for discussion:

- It is important for the MHSOAC to stake out a role that is very different from the Department, the Planning Council, and the local counties. The Department is accountable to the Governor and to the administration. The Commission is accountable to the general public. The Commission will be informed by the mental health stakeholders and it will share this with the Department of Mental Health, however the Commission has to make certain that it is thinking about strategies in order to be informed by the general public. This is a unique role for the Commission. The Department is informed by the counties and so these are some distinctions in their roles. The Mental Health Planning Council is ultimately accountable to the Governor.
- The Commission's role is to make mental health relevant to the public. The way that it makes mental health relevant to the public is to hold the Department of Mental Health, the State, as well as the county departments of mental health, accountable for public health outcomes. The Commission has to focus on intended outcomes as compared to the strategies. This is another distinct role for the Commission.
- The Governor sought members to serve on the Commission who had personal or family experience with mental illness. This shows that there was already intent in the forming of the Commission to ensure that it would be able to represent mental health stakeholders. The Act is giving the Commission latitude to define its role and strategies. The Commission has a specific responsibility to develop strategies around stigma reduction, prevention, early intervention and innovation.
- This Commission has been given authority to advise the Governor and the legislature on improving care and services; however it cannot do this if it is not connected to the broader public. There has to be very clear mechanisms to actually get information from the general public and then make decisions based on that information.
- The State Department of Mental Health carries out the county plan requirements, provides technical assistance, approves allocation of funds, provides ongoing monitoring, and they engage the local mental health stakeholders at the state level. The County Department of Mental Health engages the local mental health stakeholders at the local level, develops and implements the plan, and they have ongoing responsibility around ongoing local level monitoring. The California Mental Health Planning Council, specific to what is in the Act, is responsible for reviewing and approving California's five year education and training plan, and the education and training policy development.
- The legislation calls for the establishment of a program to prevent mental illness from becoming severe and disabling. This is not the kind of language that is going to get the public involved and rally behind the goals of the Mental Health Services Act. Ms. Clancy said perhaps the Commission can define the end-goals that will make the public more interested in joining the Commission?
- Placer County was able to define the end outcomes of their system in such a way that a lay person can understand, and there are actually indicators for them, and they are strength-based. The outcomes are framed not only in terms of adults, but in terms of children and young adults, and older adults.
- What is it that we want from the Mental Health Services Act? The end outcome is we want children and young adults to be safe, behaving well in school and learning, healthy, and at home. It is important to not only define the public health outcomes as inter-related

with each other, but to clarify what some of the indicators are: for children to be safe they are going to be cared for and protected, they are not being abused or exploited. Children that are healthy are free of illness, happy with life, free of alcohol, tobacco and other drugs. It is an indicator that if they are living at home, they are living in a safe and nurturing home. If they are at school, they are not only attending school, but they are actually succeeding in school and they have friends. If children are obeying laws, they are actually involved in their communities. The indicators are very similar for the public health outcomes for adults.

- The Commission, at their retreat, indicated that they should work on homelessness, reduction of institutional care, keeping children out of the system, employing clients and family members, and discrimination and stigma reduction. All of these outcomes could be understood as public health outcomes.
- Once the Commission makes a decision about the intended public health outcomes, and holding state and county accountable for these outcomes, it is also important that the Commission thinks about how to translate this into relevant public policy issues. Ms. Clancy said the Commission should create a public policy agenda, but that it needs to be connected with public health outcomes, i.e., recognize that the general public is invested and wants to know more about foster care, homeless children and their families, mental health of California's military personnel, and high school drop out rate in mental health.
- Three strategic directions for the Commission to actualize making mental health relevant to the public are: work towards eliminating cultural disparities and access to quality of services and supports; increase partnership coordination and collaboration in service and support delivery; and to increase communication with an involvement in the broader public in mental health services implementation and outcomes.
 - If the Commission agrees that the above are important strategic directions then the following are strategies that it can begin to implement to move forward:
 - Ensure that we have a publicly informed and driven implementation of the prevention program.
 - How is the Commission going to work towards clarifying its role and the Department's role and the implementation of innovation programs, and how will it ensure that the implementation is publicly informed and driven.
 - The housing initiative will be wonderful, but it won't provide housing for everyone, so how will the Commission make decisions about creating strategies to help eliminate cultural disparities.
 - Ensure that cultural and linguistic competent standards have been developed and applied, as well as, strategies to reduce disparities within each of the OAC committees.
 - Ensure that the CSS Committee has really thought through in its plan reviews how they will incorporate strategies to assess whether or not the county plans are actually addressing the issue of cultural disparities.
 - The Commission should establish a mechanism to make sure that its committees are working in an integrated fashion and ensure that the Commission's statewide work is not split-off from the county work.
 - Ensure coordination with the California Mental Health Planning Council and wellness and recovery standards for training personnel, consumers and family members.
 - The Education Committee is the Committee that will have to work through the coordination with the Mental Health Planning Council.

- Establish a comprehensive long-term plan for the Commission to determine how MHSA funded programs is being incorporated to ensure transformation.
- Make certain that there is coordination and collaboration with the State Department of Mental Health, not just in the area of prevention and innovation, but across the board in terms of this implementation.
- Increase communication with the broader public by establishing a positive relationship with the press, with radio stations and with local television. We need to consider our relevant public policy agenda and think about how to establish a relevant, culturally appropriate statewide anti-stigma and discrimination campaign. Assist the public to establish community level outcomes of public interest.

IV. Commission Facilitated Dialogue

Chair Steinberg said that comments should be focused on the three strategic directions outlined by Ms. Clancy and the Commission's distinguishing role.

Chair Steinberg

Chair Steinberg said the original conception of this Act was to help thousands of people who have not received help because of the under-funded, and often dysfunctional mental health system. The idea behind this Act was to affect public health outcomes and to show that if we invest in what we know works, and invest in mental health care, that we can make a difference on some of the issues that people in public life and society think are unsolvable. He said the Commission has the opportunity to drive toward these changes. He suggested that the Commission work with the existing coalitions for foster care to help drive the change for those children. He said there are many other similar opportunities where the Commission can partner with other coalitions. He said a high priority in the strategic plan should be to look for opportunities where the Commission can coalition build beyond the mental health community to add to its resources, and political power to help push towards transformation.

Commissioner Henry

Commissioner Henry asked if items one and two on page 6 is what is being looked at for action or does it include all the material behind it that says "distinguishing role, role supported by MHSA", is that for recommendation or just an explanation. Ms. Clancy said it is just for explanation and to verify that the role she is putting forward is supported by the Act.

Commissioner Henning

Commissioner Henning said that under strategic direction, in parenthesis it notes different committees, including the Executive Committee and he asked Ms. Clancy if those were her recommendations. She said this will be discussed in the next presentation, but currently there is no Executive Committee.

Commissioner Henning said he has a concern about the hiring of consultants, particularly long-term consultants, and if they are hired it is his preference that they are hired on a short-term basis. Ms. Clancy said she agrees and in her next presentation she will present some of the challenges she has around hiring.

Commissioner Doyle

Commissioner Doyle referred to page 18, where it mentions to ensure that cultural and linguistic competent standards have been developed and applied as well as strategies to reduce disparities

within each of the OAC committees. He stated that he would like to try to do this across the whole Commission, so there is consistency across all of the committees. Ms. Clancy said this was a recommendation that came up from the Cultural & Linguistic Competence Committee and some of the members of the resource Committee. She said there probably needs to be full Commission discussion. Commissioner Doyle pointed out that in a number of areas there needs to be some baseline measures identified. He suggested brainstorming on what the baselines should be in a variety of areas. Ms. Clancy said there will be discussion regarding this issue at tomorrow's meeting.

Commissioner Prettyman

Commissioner Prettyman said on page 14 of the handout, decriminalization and stigma-reduction are on the same line and she feels these are two separate issues and should be on separate lines. She said on the registry where the Commissioners are being defined she has an issue that the consumers on the Panel should be identified as "consumers" and not "severe mental illness".

Commissioner Linford

Commissioner Linford said he doesn't like to see himself described as severely mentally ill. He said if this Commission is trying to effect change, but is using terminology that is binding, discriminating, and offensive then how can we change anyone else. Ms. Clancy clarified that this was a copy from a document, and it points to one of the issues she brought up earlier, and that is that it's important for the Commission to be transitioning language.

Commissioner Chesbro

Commissioner Chesbro said with regards to the organizational chart he would like to see the stakeholders more centrally viewed in the organizational chart. He also mentioned that while the Governor has more direct authority over these activities, the legislature also has an oversight role and approves the budget, so there should be a box on the organizational chart for the legislature as well. Ms. Clancy said if the Commission is really going to start moving toward these roles, the Commission will need to think about this much more intentionally and get clear about where we are placing mental health stakeholders. Ms. Clancy said she sees them as part of the general public that the Commission is accountable to. She said it is important to get a visual that is reflective of where the Commission sees their role as it moves towards finalizing a work plan for next fiscal year.

Commissioner Henry)

Commissioner Henry said in her perspective there should be one set of standards for both the Commission and committee members. She feels Ms. Clancy's suggestion regarding mental health outcomes is good, and she would like to see the Commission do outreach on the public health component so they understand the process.

Commissioner Poat

Commissioner Poat said he shares the enthusiasm that the Chair and other Commissioners have for this plan. Ms. Clancy has put forward a very good base for comment. He said he hopes the Commission will hear from other stakeholders tomorrow who will share their opinions so that the Commission can have a true consensus. Ms. Clancy said she is in full agreement, and if there are not enough individuals attending in order for the Commission to feel that they have enough public input to make some decisions about the recommendations, then they should think about a process to get more public input.

Commissioner Linford

Commissioner asked who was on the Cultural and Linguistic Competence Committee. Ms. Clancy said the people on the Committee were defined as statewide representatives from organizations that were recognized within the community as having responsibility in order to move forward cultural and linguistic competence. The Committee consists of representatives from the State Department of Mental Health (the Office of Multi-Cultural Services), California Institute of Mental Health (The Center for Multi-Cultural Development), and COAC (?) (which consists of the client network NAMI, UACC, and the Mental Health Association), the CCAC (a cultural and competence advisory committee to the Department of Mental Health), the Center for Reducing Disparities at UC Davis Med Center. She said there may be more organizations that the Commission may want to consider adding on to this resource committee and this will be a focus of discussion.

Commissioner Poat

Commissioner said he is very excited about the progress that has been made in putting forward the county plan. He said it is very interesting that we are finding ways to define how to work together. He said this is one of the Commission's implied goals and he suggested that the Commission take one of the successful county models and learn how to replicate that when the Commission begins to distribute funds or making policy choices.

V. Organizational Structure to Support MHSOAC in Achieving its Goals and Implementing Strategy

Ms. Clancy provided a presentation focusing on structural recommendations to help the Commission fulfill its role in its strategic strategies.

- Commissioners serve a three year term and appointments are staggered. The Executive Director is an exempt state employee, and the Commission has the responsibility of hiring or dismissing the Executive Director.
 - The concern of Commission continuity was expressed. It was suggested that Commissioners whose terms are coming to an end start the application process to re-apply. Chair Steinberg said discussions are needed to make sure continuity is maintained.
 - It was recommended to provide more definition (i.e. reappointment pending) on the Commission member listing.
- There are six committees within the Commission: Community Services and Supports; Prevention and Early Intervention; Innovation; Outcome and Measurements; Capitol and IT; and Education and Training.

Structural Recommendations:

- Discuss creating an Executive Committee composed of the Chair, the Vice Chair and one of the Chairs from Prevention and Innovation and CSS.
 - It was suggested that the first Executive Committee should be elected by a vote of the full Commission.
 - It was pointed out that an Executive Committee should be transparent to the Commission so that the Commission members have the opportunity to participate in decisions and outcomes.
- Discuss establishing the draft public policy agenda for Commission action for the Executive Committee to ensure that the Executive Committee is only doing things in draft and it comes back to the full Commission.
- The Executive Committee would serve as the oversight over the Cultural and Linguistic Competence Committee

- The Executive Committee would be responsible for ensuring the integration across the OAC committees.
- Discuss the pros and cons of operating in accordance with the Bagley-Keene Act and decide if this would include committee meetings. If it does include committee meetings that are open to the public then there are a number of logistical issues that need to be thought through: (a) the expense of making certain that there are meeting rooms large enough; (b) think closely about where meetings are being held; (c) think about the relationship of the public to the process that is going on within the committee meetings.
 - Chair Steinberg said he feels very strongly that everything should be open to the public and the Commission should go out of its way to ensure that it is complying beyond the letter of the Bagley Keene Act. The question was asked about committees that don't meet in person but meet via conference call. This would not be feasible to do in a public forum.
 - Ms. Clancy said she will research the legal requirements of the Bagley Keene Act as it pertains to committees and report back to the Commission.
- All committees should create transparent role and responsibility statements. There also needs to be transparent criteria for membership recruitment and selection.
 - Commissioner Henry said the selection of the Innovation Committee was a two month process and the Commission went through a very deliberate course to make sure small counties, large counties, diversity, family members and community knew about this and she doesn't know what else could have been done for transparency. Chair Steinberg said perhaps the Innovation Committee could be the model for the transparency guidelines.
- Staff is in the process of submitting a budget change proposal. Ms. Clancy said the budget change proposal for '07 includes a request for a higher level of civil service classification (SSM1) and a higher number of total OACC staff (from 8 to 10). The following line items are being assessed and budget numbers will be presented to the Commission at a later date. The line item for independent office space has to do with public perception and making sure to differentiate between the OAC and the Department. Line item to fund attendance of family members and consumers at OAC meetings – previously, the client network NAMI and UACC had small contracts from the Department to attend stakeholder meetings. The line item for legal counsel will be very important. The line item for expert consultants would refer to the ability for staff to bring in expertise that is beyond their own expertise for specific tasks. The current budget is just below one million dollars and what the budget change proposal is between \$1.8 and \$2 million.
- A temporary staffing plan is being proposed because Ms. Clancy is still assessing what the needs are of the Commission. In an effort to not make hiring choices in a vacuum she is proposing that until the budget is signed, that consultants work, at a minimum, staffing each of the committees.
 - Chair Steinberg stated that Ms. Clancy's budget change proposal is significant because under the current budget the Commission cannot hire staff above a \$60,000/year level. In order to track the type of expertise that the Commission desires it would be quite difficult at this level.
 - Commissioner (?) said it would be great to hire permanent staff tomorrow but it might be August before the budget is approved, therefore temporary staff/consultants are needed short-term.

The meeting was adjourned.